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Bib Data Sheet

|                             |                                   |              |                        |                                  |
|-----------------------------|-----------------------------------|--------------|------------------------|----------------------------------|
| SERIAL NUMBER<br>09/805,586 | FILING DATE<br>03/13/2001<br>RULE | CLASS<br>297 | GROUP ART UNIT<br>3636 | ATTORNEY DOCKET NO.<br>DP-301891 |
|-----------------------------|-----------------------------------|--------------|------------------------|----------------------------------|

## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

None

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

None

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 04/20/2001

| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR<br>COUNTRY<br>OH | SHEETS<br>DRAWING<br>3 | TOTAL<br>CLAIMS<br>11 | INDEPENDENT<br>CLAIMS<br>2 |
|---|--|---------------------------|------------------------|-----------------------|----------------------------|
| Verified and Acknowledged<br>Examiner's Signature           | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Initials |                           |                        |                       |                            |

## ADDRESS

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## TITLE

Tunable control side air bag cushion

|                               |   |   |
|-------------------------------|---|---|
| FILING FEE<br>RECEIVED<br>840 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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